#### Edgar Filing: TANG FOUNDATION FOR RESEACH OF TRADITIONAL CHINESE MEDICINE - Form 4

#### TANG FOUNDATION FOR RESEACH OF TRADITIONAL CHINESE MEDICINE

Form 4

October 29, 2010

## FORM 4

# UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

Check this box if no longer subject to Section 16. Form 4 or

Form 5 obligations

may continue. See Instruction

STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP OF **SECURITIES** 

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934, Section 17(a) of the Public Utility Holding Company Act of 1935 or Section 30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1(b).

1. Name and Address of Reporting Person \* TANG FOUNDATION FOR RESEACH OF TRADITIONAL CHINESE MEDICINE

> (Last) (First)

8960 SPANISH RIDGE AVENUE

(Middle)

(Zip)

(Street)

(State)

2. Issuer Name and Ticker or Trading Symbol

SIGMATRON INTERNATIONAL INC [SGMA]

3. Date of Earliest Transaction (Month/Day/Year)

10/27/2010

4. If Amendment, Date Original

Filed(Month/Day/Year)

**OMB APPROVAL** 

**OMB** Number:

3235-0287

Expires:

January 31, 2005

Estimated average burden hours per

response...

0.5

5. Relationship of Reporting Person(s) to Issuer

(Check all applicable)

Director X\_\_ 10% Owner Other (specify Officer (give title

below)

6. Individual or Joint/Group Filing(Check Applicable Line)

\_X\_ Form filed by One Reporting Person Form filed by More than One Reporting

LAS VEGAS, NV 89148

(City)

(City)	(State) (Z	Zip) Table	e I - Non-D	erivative (	Secur	ities Acq	uired, Disposed o	of, or Beneficial	lly Owned
1.Title of Security (Instr. 3)	2. Transaction Date (Month/Day/Year)	2A. Deemed Execution Date, if any (Month/Day/Year)	3. Transaction Code (Instr. 8)	4. Securities Acquired on(A) or Disposed of (D) (Instr. 3, 4 and 5)			5. Amount of Securities Beneficially Owned Following	6. Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)
			Code V	Amount	(A) or (D)	Price	Reported Transaction(s) (Instr. 3 and 4)		
Common Stock	10/27/2010	10/27/2010	S	300	D	\$ 5.75	202,594	D	
Common Stock	10/28/2010	10/28/2010	S	8,000	D	\$ 5.55	194,594	D	

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Persons who respond to the collection of SEC 1474 information contained in this form are not (9-02)required to respond unless the form displays a currently valid OMB control number.

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# Table II - Derivative Securities Acquired, Disposed of, or Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

	1. Title of	2.	3. Transaction Date	3A. Deemed	4.	5.	6. Date Exerc	cisable and	7. Titl	le and	8. Price of	9
	Derivative	Conversion	(Month/Day/Year)	Execution Date, if	TransactionNumber		Expiration Date		Amou	int of	Derivative	J
	Security	or Exercise		any	Code	of	(Month/Day/	Year)	Under	lying	Security	,
	(Instr. 3)	Price of		(Month/Day/Year)	(Instr. 8	Derivative	,		Securities		(Instr. 5)	]
		Derivative			Sec			(Instr. 3 and 4)			(	
Security		Security				Acquired						J
		-				(A) or						J
						Disposed						-
						of (D)						(
						(Instr. 3,						
						4, and 5)						
										Amount		
										Amount		
							Date Expiration Exercisable Date	Expiration		or Number		
									of			
					C-1- 1	7 (A) (D)						
					Code V	(A) (D)				Shares		

# **Reporting Owners**

Reporting Owner Name / Address

Relationships

Director 10% Owner Officer Other

X

9. Nu Deriv Secur Bene Own Follo Repo Trans (Instr

TANG FOUNDATION FOR RESEACH OF TRADITIONAL CHINESE MEDICINE 8960 SPANISH RIDGE AVENUE

LAS VEGAS, NV 89148

**Signatures** 

/s/ Vytas Ambutas, Asst.
Secretary
10/29/2010

\*\*Signature of Reporting Person Date

## **Explanation of Responses:**

- \* If the form is filed by more than one reporting person, see Instruction 4(b)(v).
- \*\* Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, *see* Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.

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